



## Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact [support@jstor.org](mailto:support@jstor.org).

# PUBLIC HEALTH REPORTS

---

VOL. 35

June 4, 1920

No. 23

---

## CONFERENCE OF HEALTH AUTHORITIES.

### STATE AND TERRITORIAL HEALTH AUTHORITIES IN ANNUAL CONFERENCE WITH THE UNITED STATES PUBLIC HEALTH SERVICE.

Forty-two States were represented at the Eighteenth Annual Conference of the State and Territorial Health Authorities with the United States Public Health Service, which was held in Washington, May 26 and 27.

The conference was opened by the Surgeon General. Assistant Secretary of the Treasury J. H. Moyle, who was present, formally welcomed the guests. Mr. Moyle spoke of his deep interest in the work of the Public Health Service and in all that concerned the health of the people. He noted with satisfaction, he said, that public thought was directed more intelligently than ever toward health problems. He spoke of the necessity of popular support for expenditures from the public treasury for the conservation of human energy, health, and life. He remarked that personally he favored a separate executive department in charge of public health matters; and he suggested that something might be said in favor of a Department of Public Health and Education, which should combine two supremely important functions of government—preservation of the strength of the body and development of the powers of the mind.

After the roll call of delegates and the appointment of the committee on resolutions, the chairmen of the standing committees presented their reports. The reports were adopted and the recommendations indorsed.

In connection with the report on rural sanitation, Surg. L. L. Lumsden reported that according to the data obtained from a canvass conducted by the Office of Rural Sanitation among all the State health departments, only about 6 per cent of the rural population of the United States (January 1, 1920) is provided with whole-time local health service of any kind whatsoever. He stated that the conclusion is unescapable that there is serious need for a constructive concerted, persistent, and vigorous program of activity by our health officers to inform the public at large of the vital need for an increase in the extent of health service among our rural population.

Prof. C. W. Stiles, chairman of the board appointed by the Surgeon General to study the problem of sanitary disposal of human excreta in unsewered communities, then gave a report on the progress of the work of this board during the past year. Prof. Stiles emphasized the necessity for better supervision over scavenging. The use of sewers or septic tanks and burial by one technique or another were stated to be the most practical methods of disposal of excreta considering present conditions of finance and labor. Experimental work with the surface sawdust composting method and the barrel-sawdust privy for use in sawmill localities was described. In concluding, Prof. Stiles stressed the fact that in considering the relative location of privies and disposal plants to wells and water edge, the moisture content of the voids in the soil should be considered as well as the matter of distance.

The afternoon session opened with discussions of the Fess-Capper bill for physical education and of the Sheppard-Towner bill for public protection of maternity and infancy, led by Dr. W. S. Rankin of North Carolina, and Asst. Surg. Gen. J. W. Schereschewsky, respectively. Resolutions which were adopted by the conference in regard to these bills are printed below.

A talk on "The Coordination of Effort and the Promotion of Efficiency in the Field of Sanitary Engineering" was made by Asst. Surg. Gen. A. J. McLaughlin, who emphasized the fact that highly skilled technical ability is required of the head of a State sanitary engineering division. The development of strong, active, functioning division of sanitary engineering in the State departments of health was pointed out as one of the most important duties of the United States Public Health Service. Through the efforts of the present very limited personnel in this activity of the service Dr. McLaughlin reported that seven States had during the past year and a half established sanitary engineering divisions for the first time. In the next year he hoped greater activity could be shown in this work.

Dr. M. M. Seymour, of Saskatchewan, Canada, was called on to speak concerning health work in Canada. He told of the establishment of health centers in Canadian hospitals and also spoke of the scarcity of medical aid in his Province. He reported that the plan in many of their cities of placing the health work under educational authorities was not generally satisfactory.

Dr. Taliaferro Clark, emphasizing the important place that child hygiene occupies in public-health work and preventive medicine, outlined the activities of the Public Health Service in this work. These activities include investigation of the safety and usefulness of dried milk powder in infant feeding; physical examination of underweight school children to determine the causative rôle that hamper-

ing physical defects play in malnutrition; investigation into maternity and infant hygiene; the study of dental problems, with especial reference to school children; and the examination of retarded school children, supplemented by educational health talks in the schools and the distribution of appropriate health literature to the parents.

Dr. Clark stated that the demonstration of the usability of dried milk powder in infant feeding is of extreme importance. The importance is better realized when it is understood that it may soon be possible to supply milk for babies in tropical and semitropical countries where there are no cows or where the milk is dangerous.

Dr. Clark also gave an account of the work of the Service in mental hygiene. On request of proper State authority, the Public Health Service is cooperating with the University of Oregon in making a survey of the extent of delinquency, dependency, and feeble-mindedness, from the standpoint of mental hygiene, in that State.

On Thursday morning the subject of child hygiene was again taken up. Dr. Knight and Dr. DeVilbiss gave accounts of the Service investigations of child hygiene problems in Missouri, undertaken upon request of the governor and State board of health for the purpose of establishing standards and organizing the division of child hygiene for the State. The work consists of a house-to-house canvass to determine the percentage of birth registration, provision for school hygiene, the establishment of health centers for prenatal and preschool clinics, by obtaining one or more community health nurses and school nurses, and the dissemination of public health information.

Asst. Surg. Gen. A. J. McLaughlin followed in a brief talk urging the establishment of an endemic index in every State, with communicable disease control as the objective.

The entire conference paid tribute to Asst. Surg. Gen. H. R. Carter by rising and giving prolonged applause in appreciation of his long and brilliant service in public health work. Dr. Carter is about to retire from active duty.

An interesting progress report of the cooperative malaria work of the Service with State health departments and the International Health Board in 11 southern States was given by Surg. L. D. Fricks.

A short talk on the need of better morbidity reporting was made by Asst. Surg. Gen. B. S. Warren.

As first speaker on the subject of rural sanitation, Dr. W. S. Rankin, of North Carolina, outlined a plan of presenting "Financial Equivalents" in county health work, which he is developing in North Carolina. This plan calls for the finding and establishing of a financial value or equivalent for each item and each unit of county health work by a business commission to be appointed by the governor of

the State. With such an equivalent or yardstick, comparisons of the value of work in different counties, irrespective of their size or budgets, could easily be made, Dr. Rankin stated. This principle, he believes, will promote efficiency and will bring about the payment of salaries on a basis of merit.

Dr. Ennion G. Williams, State Health Commissioner of Virginia, and Passed Asst. Surg. W. F. Draper of the United States Public Health Service, were the next speakers and presented reports on the results of the rural health work conducted in 12 counties in Virginia under cooperative arrangements between the State board of health and the Public Health Service.

With a budget of \$2,000 for each county, \$500 furnished by the State board of health, \$500 by the United States Public Health Service, and \$1,000 by the county, a sanitary demonstrator was engaged for a year. The demonstrator concentrated his efforts upon one branch of health work, namely, the control of soil pollution and the protection of drinking water supplies against dangerous pollution.

In every county in which this demonstration work has been conducted the speakers reported the results as highly encouraging. In one of the counties there have been installed over 2,000 sanitary toilets as a result of the educational work conducted by the sanitary demonstrator.

The striking fact was pointed out that in the majority of the demonstration counties the county authorities have already, within a year since the demonstration work, begun to carry on health work with larger appropriations, in some of the counties amounting to from \$7,500 to \$10,000 a year for health work. Dr. Williams and Dr. Draper emphasized the importance of this demonstration of the accomplishment of the first essential step in county health work in Virginia, and expressed the opinion that this same principle of health work may be applied advantageously in most sections of the United States.

The afternoon session opened with an advance showing of a new motion picture film entitled "Stung, by Amos Quito," prepared through the cooperation of the United States Public Health Service, United States Bureau of Fisheries, and the American Museum of Natural History, by the Bray Studios. The picture shows where and how mosquitoes breed, their life history, the distinguishing characteristics of *Anopheles* and *Culex*, the relation of *Anopheles* to malaria, the life cycle of the malaria parasite, and the various measures to be taken in order to control or eradicate mosquitoes and malaria. When completed the picture will total about 1,000 feet of film, and will be procurable by rental through regular film exchanges.

Through the courtesy of Dr. C. St. Clair Drake, an excellent film dealing with the work of a public health nurse was shown.<sup>1</sup> Time did not permit the showing of a valuable two-reel film entitled "Come Clean," prepared by the dental section of the Surgeon General's Department of the Army. Copies of this film are now being successfully used by the United States Public Health Service in its dental hygiene work.

In the leprosy report given by Surg. G. W. McCoy, Director of the Hygienic Laboratory, it was stated that very encouraging results were being obtained in the treatment of lepers at the Leprosy Investigation Station in Kalihi, Hawaii, with the ethyl esters obtained from chaulmoogra oil. Following a course of treatment extending over about a year, 48 lepers, treated according to the new method, were paroled in October, 1919, and up to now have remained free from the disease. Dr. McCoy stated that it would naturally require some time, probably years, to determine whether a real cure for leprosy had been discovered.

Asst. Surg. Gen. R. H. Creel made a brief statement regarding the propriety, from a public health standpoint, of public funerals or the opening of caskets containing the remains of American soldiers returned from France. He said that the Bureau was of the opinion that, while no danger could result from either a public funeral or from the opening of such caskets, the viewing of remains accomplishes no useful purpose, and that it would be to the best interest of all concerned to discourage the opening of caskets of the returned soldier dead.

Surg. F. C. Smith spoke on "The Migration of Tuberculous Persons." He remarked that the movement of tuberculous persons from place to place is still a problem, and that the Public Health Service, of course, is without authority to control their movements. The remedy lies, he stated, in giving proper instruction to the general practitioner of medicine so that he will discourage the migration of his patients. To the same end, he said, general hospitals should provide care for tuberculous patients so that they may receive treatment near their own homes. The Surgeon General, in a recent telegram to the American Medical Association, indorsed a resolution passed by the National Tuberculosis Association in 1916, that all general hospitals should provide tuberculosis wards. Such a measure, Dr. Smith believed, would prove a most valuable means of instructing internes and house physicians and in a few years would result in an improved general knowledge of tuberculosis and in the patients being cared for near their homes.

---

<sup>1</sup> This picture can be purchased from the National Organization for Public Health Nursing, 156 Fifth Ave., New York.

Asst. Surg. Gen. Pierce, in charge of the division of venereal diseases, explained to the conference the method of distributing funds allotted to State boards of health for venereal disease control work. He outlined several branches of the work of the division of venereal diseases whereby assistance is being rendered to State boards of health in cooperating with them to enlarge the work in their States. He referred briefly to the abstracts of current medical and scientific literature, stating that approximately 300 medical and scientific publications were read each month by employees of the division, and abstracts of those articles containing useful information in reference to venereal disease were made and furnished to State boards of health and to others interested.

Dr. Pierce then presented very briefly the result of tabulating data from a limited number of venereal disease case reports obtained in four of the extra-cantonment areas in which an accurate survey of the population had been made to determine the age distribution of the inhabitants. The apparent rates resulting from this tabulation are highly indicative that venereal infections occur at an early age. If this apparent indication is proved by subsequent and more detailed investigation, it will have an important influence on the question of sex education to be given by parents and teachers.

An appeal was made for a more careful and complete recording of all available data relative to the progress of venereal disease control work in the various States. This applies particularly to the necessity of accurate detailed case records being kept by each clinic and a careful investigation, so far as it is practicable, of the case reports made by private physicians to the State boards of health. If careful records are kept over a period of a few years, much valuable information will be available, the use of which will enable venereal disease control officials to direct their efforts in a more intelligent manner.

Asst. Surg. Gen. R. H. Creel spoke on the subject of maritime quarantine against the importation of venereal diseases in their active stages. Extensive investigations at ports of San Francisco and New York have indicated, Dr. Creel stated, that the most that restrictive quarantine measures could accomplish would be the prevention of the addition of a comparatively small number of cases to the sum total of venereal cases already existant in the respective ports, and the promise of benefit would not be commensurate with the economic loss due to interference with traffic. For this reason and the fact that public opinion would hardly support such radical procedure, the Bureau is definitely averse to the proposed plans.

Dr. C. St. Clair Drake, chairman of the committee on resolutions, read the following resolutions, which were adopted by the conference.

*To the Conference of State and Territorial Health Officers with the Surgeon General of the United States Public Health Service:*

Your committee on sanitation of public conveyances begs to report that copies of the Railway Sanitary Code, prepared and issued by the committee on health and medical relief of the United States Railroad Administration, have been considered in detail and revised by a subcommittee of the executive committee of the Conference of State and Provincial Health Authorities, and have been adopted in that conference as the Standard Railway Code and recommended for adoption by the States. Your committee has reviewed that code as now amended and recommends its adoption by this conference.

It wishes to add the following resolution in connection therewith:

*Resolved*, That any laws concerning the sanitation of public conveyances and public railway stations should contain a clause penalizing the public for befouling such conveyances and such stations, for we recognize that unclean and befouled public conveyances and stations are made so by dirty people and they should be penalized for their filth.

(Signed) OSCAR DOWLING, *Chairman*,  
VICTOR G. HEISER,  
J. N. HURTY,  
W. F. COGSWELL,  
T. B. BEATTY,

*Committee on Sanitation of Public Conveyances.*

Whereas there has been introduced in Congress a bill (H. R. 10925, S. 3259, known as the Sheppard-Towner bill) making provision for promoting the care of maternity and infancy in the several States; and

Whereas there has been created in this bill new Federal and State health agencies known as "A Federal Board of Maternal and Infant Hygiene" and "State Boards of Maternal and Infant Hygiene"; and

Whereas the establishment of new or competing health organizations, Federal or State, weakens the efforts of the existing legally constituted health agencies: Therefore be it

*Resolved*, That it is the sense of the Eighteenth Annual Conference of the State and Territorial Health Authorities with the United States Public Health Service that the objects of the Sheppard-Towner bill for the public protection of infant and maternal life be strongly indorsed; and be it further

*Resolved*, That it is the sense of this conference that the Federal administration of this act should be under the supervision and control of the Public Health Service, and in States, of the State health authorities; and that the sections of said bill relating to administration be changed to accord with these suggestions; and be it further

*Resolved*, That this resolution be laid before the Committees on Education and Labor of the House and Senate by a special committee representing this conference.

*Resolved*, That it is the sense of the Eighteenth Annual Conference of the State and Territorial Health Authorities with the United States Public Health Service that the objects of the Fess-Capper Bill for physical education should be strongly indorsed; and be it further

*Resolved*, That it is the sense of this conference that the Federal administration of the said bill as it relates to the sanitation of school buildings and grounds and the detection and treatment of physical and mental defects and diseases of school children should be under the direction of the United States Public Health Service; and be it further



*Resolved*, That section 13 of the said bill should be amended so as to leave to the legislative bodies of the States the designation of the State machinery through which the provisions of the bill shall be carried into effect within the States, and that subsequent sections of the said bill be amended to accord with the change in section 13; and be it further

*Resolved*, That this resolution be laid before the Committee on Education and Labor of the Senate and Committee on Labor in the House by a special committee representing this conference.

Whereas (1) over 53 per cent of the population of the United States is rural and the food supply for our whole Nation is dependent upon production in the rural districts; and

Whereas (2) physical defectiveness and preventable diseases have been found by extensive, careful studies to be as prevalent in our rural as in our urban population and only about 3 per cent of our rural population is served by local whole-time health departments approaching adequacy; and

Whereas (3) the promotion of rural health work is obviously of local, State, and National importance and, as has been demonstrated, may be secured to the highest permanent advantage by cooperative activities of local, State, and National governmental health agencies; and

Whereas (4) for the Public Health Service to proceed in a businesslike way in effecting its cooperative arrangements with State and local governmental health agencies for the promotion of rural health work a continuing appropriation is necessary; and

Whereas (5) the application of the principle of Federal aid extension to rural health promotion appears entirely logical, consistent with the theory and established practices of our system of government, and is urgently needed at this time: therefore, be it

*Resolved*, by the Conference of State and Territorial Health Officers with the Public Health Service, that the members of this conference individually and collectively indorse the principles of legislation contemplated by the Lever Rural Health Bill introduced in the Sixty-sixth Congress and agree to advocate such principles with a view to bringing about a nation-wide popular demand upon the Congress of the United States for such legislation.

### The program of the conference follows:

Opening remarks by the Surgeon General.

Address by Assistant Secretary of the Treasury J. H. Moyle.

Roll call of delegates.

Appointment of committees.

### Reports of Standing Committees.

Sanitation of public conveyances—Dr. Oscar Dowling.

Interstate quarantine regulations—Dr. John S. Fulton.

Rural sanitation—Dr. W. S. Rankin.

Trachoma—Dr. John McMullen.

### Special Reports.

Progress report of board appointed by the Surgeon General to study the problem of sanitary disposal of human excreta in unsewered communities—Prof. C. W. Stiles.

### New Business.

Public Health administration:

Discussion of data obtained from questionnaire concerning whole-time county health officers in the various States.

Coordination of effort and promotion of efficiency in field of sanitary engineering.

## Child hygiene:

Discussion of Fess bill for physical education promoted by the National Physical Education Service.

Discussion of Sheppard-Towner bill for public protection of maternity and infancy.

Report of child-hygiene activities of the service.

## Endemic index and communicable-disease control.

## Malaria:

Extension of cooperative malaria work.

## Better morbidity reports.

## Rural sanitation:

Determination of a workable plan of presenting financial equivalents in county health work.

Rural sanitation with special reference to county demonstration work with small budgets in Virginia.

Discussion of cooperative demonstration work in rural sanitation in Virginia.

Mosquito film.—Produced by the Public Health Service in cooperation with the Reclamation Service, Bureau of Fisheries, and the Bray Studios.

Public health nursing film.—Prepared by Dr. C. St. Clair Drake.

Provision for lepers.

Migration of tuberculous persons.

Report of resolutions committee.

## Venereal diseases:

Control of venereal diseases with reference to the relation of the United States Public Health Service to States and cities in handling this problem.

Maritime quarantine against the importation of venereal diseases in their active stages.

In addition to the participation in the conference by officers of the venereal disease division, a special conference was held during the afternoon of May 26 and the morning of May 27. On the night of May 26 a special meeting took place to which all State health officers and venereal disease control officers were invited. A symposium on arsphenamine was given, which included the chemistry of arsphenamine, method of manufacture, results of experimental work in relation thereto, and demonstration of the proper technique for making solutions of all the various brands of arsphenamine. The clinical and therapeutic uses of arsphenamine were quite fully discussed by two prominent syphilographers. This evening meeting held by the division of venereal diseases was one of the most interesting sessions of the conference. A program of the special conference of venereal disease control officers follows:

1. How can we bring about better reporting among doctors?—Oscar Davis.  
Discussion led by W. A. Brumfield.
2. How may the passage of the quack ad law be assured?—R. L. Russell.  
Discussion led by L. W. Feezer.
3. How may State boards of health use advantageously the city grading program for stimulating greater activity in cities?—G. M. Byington.  
Discussion led by W. F. King.
4. Suggestions for developing a full program of work in rural communities.—W. C. Blasingame.  
Discussion led by Millard Knowlton.

5. How can we increase the efficiency of clinics?—H. G. Irvine.  
Discussion led by C. V. Akin.
6. The treatment of defective and delinquent women.—Wm. Elder.  
Discussion led by J. S. Lawrence.
7. Coordination of private and public agencies in public health work.—G. G. Taylor.
8. How can we win the more active cooperation of medical colleges?—H. A. Streeter.

The attendance of sanitary engineers from 23 States was an unusual feature of the conference. The chief of the division of domestic quarantine spoke of the rapid strides now being made in the extension of sanitary engineering work of the State health departments and the importance of having fully competent and efficient engineering divisions to fairly meet the large responsibilities now being placed upon these departments. The proposed program of the Service for the fostering and upbuilding of these engineering activities was sketched. The hope was expressed that the Federal Government would soon have funds sufficient to not only assist in building up new or recently organized State and local engineering divisions, but also to aid the well-established divisions which were now being required to undertake work properly belonging to the Government, as in the case of the certification of water supplies.

In addition to the general sessions of the State and Territorial health officers' conference, separate sectional meetings were had with representatives of the Service. A paper was read on the "Coordination of the Control of Drinking Water on Interstate Carriers with Engineering Functions of State Departments of Health," by C. M. Baker, Director of the Division of Sanitary Engineering of Wisconsin. A discussion of several phases of the supervisory control over railway water supplies followed, in which most of the State engineers participated. A paper on "Mosquito Control as an Engineering Undertaking," by Sol Pincus, Associate Sanitary Engineer, United States Public Health Service, was presented. The discussion, which was led by Asst. Surg. Gen. H. R. Carter, brought out accounts of the experiences and successes in malaria and mosquito control work in Arkansas, Florida, Alabama, Tennessee, Virginia, and Pennsylvania.

The subject of the control of pollution of streams and coastal waters, presented by W. F. Wells, Sanitarian, State Conservation Commission of New York, occasioned a general debate on the justification for using public waters for the disposal of wastes and the extent to which other uses of such waters, as for shellfish propagation, recreation purposes, etc., should be considered.

Accounts of the engineering activities of the health departments of Pennsylvania, Ohio, and New York were given to the section

meeting by the chief engineers of the respective sanitary engineering divisions.

The topic, however, of greatest interest and concern to everyone of the group of State engineers was the means for coordinating the engineering activities of the various States. The need for standardization of policies and exchange of experiences among the sanitary engineers in official administrative positions was considered of paramount importance for increasing the efficiency of work in this field. It was the opinion of the State engineers that very much toward the coordination and standardization of the activities of State sanitary engineering divisions could be effected and properly accomplished by the United States Public Health Service. The specific request was made to the chief of the division of domestic quarantine for the full-time detail of an engineer to collect, analyze, and report to all State engineering divisions, data on the prevailing and proposed activities in this field. For this same purpose permanent standing committees were appointed as follows: Water Supply (including laboratory procedure), Mr. W. H. Dittoe, chairman; Sewage and Stream Pollution, V. M. Ehlers, chairman; Laws, Organization, Policy, and Procedure of State Sanitary Engineering Divisions, H. A. Whittaker, chairman; Milk Problems, Theodore Horton, chairman; Mosquito Control, R. Messer, chairman; Swimming Pool Sanitation, S. De M. Gage, chairman.

---

### NOTIFIABLE DISEASE LIST INCREASED IN ENGLAND.

The British Ministry of Health has recently issued a regulation increasing the number of diseases required to be notified to the local medical officers of health. The following diseases have been added to the list of diseases required to be reported:

Ophthalmia neonatorum (as defined in the regulations).	Dysentery.
Acute encephalitis lethargica.	Trench fever.
Malaria.	Acute primary pneumonia.
	Acute influenzal pneumonia.

---

### PSYCHIATRIC STUDIES OF DELINQUENTS.

It has been necessary to postpone publication of Parts III, IV, and V of Psychiatric Studies of Delinquents. They will appear in subsequent issues of Public Health Reports.